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PTO/SB/21 (08-00)
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/055,731	
	Filing Date	01/23/02	
	First Named Inventor	Mary Nix	
	Group Art Unit	unknown	
	Examiner Name	unknown	
Total Number of Pages in This Submission	3	Attorney Docket Number	10557.002

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <i>Request for Withdrawal as Attorney or Agent</i>
Remarks		RECEIVED FEB 07 2003 TECHNOLOGY CENTER R3700

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Soules + Wallace, P.C.
Signature	<i>Tanice Leverett</i>
Date	1/17/03

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 			
Typed or printed name	Tanice Leverett		
Signature	<i>Tanice Leverett</i>	Date	1/21/03

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PTO/SB/83 (03-02)

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/055,731
Filing Date	01/23/02
First Named Inventor	Mary Nix
Group Art Unit	unknown
Examiner Name	unknown
Attorney Docket Number	10557.002

To: Assistant Commissioner for Patents
Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

• invoices not paid over the course of 12 months

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☒ This request is made on behalf of myself and

☒ all the attorneys/agents of record,

☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or

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APPROVED

E. Rollins-Cross

Director, Group 3700

Name

Tanice Leverett

Signature

Tanice Leverett

Date

1/21/03

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